

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS
AND INTERFERENCES

In Re Application of Rising III.

Attorney Docket No.: 80398.P503

Application Number 10/044,168

Filed 10/22/01

For Graphical Rewriting System for Multimedia Descriptions

Group Art Unit: 2672 Examiner: Havan, T.

Address to:

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450

RECEIVED

AUG 25 2004

Technology Center 2600

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

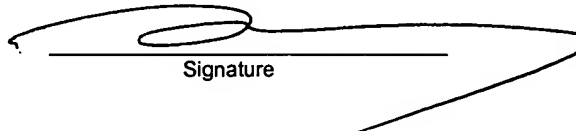
The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 330.00

- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____
- ☒ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.
- ☐ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 02-2666. I have enclosed a duplicate copy of this sheet.
- ☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

- ☐ applicant/inventor.
- ☐ assignee of record of the entire interest
See 37 CFR 3.71, Statement under 37 CFR 3.73(b)
is enclosed. (Form PTO/SB/96)


Signature

- ☒ attorney or agent of record.

Sheryl Sue Holloway, Reg. 37,850
Typed or printed name

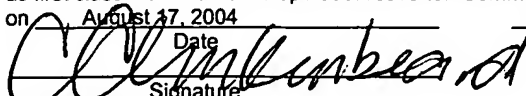
- ☐ attorney or agent acting under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) _____

Aug. 17, 2004
(Reg. No.) Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on August 17, 2004


Signature

Cheri Clinkenbeard
Typed or printed name

08/23/2004 WASFAM 00000002 10044168

05/01/03

01 FC:1401

330.00 OP



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AF ✓

FEE TRANSMITTAL FOR FY 2004

(FY 2004 Begins 10/01/2003)

TOTAL AMOUNT OF PAYMENT (\$) 330.00

Complete if Known:

Application No. 10/044,168Filing Date 10/22/01First Named Inventor Rising, III.Examiner Name Havan, T.Art Unit 2672Attorney Docket No. 80398.P503

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☐ Applicant claims small entity status. See 37 CFR 1.27.

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None☒ Deposit AccountDeposit Account Number : 02-2666

Deposit Account Name: _____

☒ The Director is Authorized to do the following with respect to the above-identified Deposit Account:☐ Charge fee(s) indicated below.☒ Credit any overpayments.☒ Charge any additional fees during the pendency of this application.☒ Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.☐ Charge fee(s) indicated below except for the filing fee.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility application filing fee	_____
1002	340	2002	170	Design application filing fee	_____
1003	530	2003	265	Plant filing fee	_____
1004	770	2004	385	Reissue filing fee	_____
1005	160	2005	80	Provisional application filing fee	_____
SUBTOTAL (1) \$					<u>0</u>

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

				Extra Claims	Fee from below	Fee Paid
Total Claims _____				- 20** = _____	X _____	= _____
Independent Claims _____				- 3** = _____	X _____	= _____
Multiple Dependent _____					_____	= _____
**Or number previously paid, if greater; For Reissues, see below.						
Large Entity		Small Entity		Fee Description	Fee from below	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)			
1202	18	2202	9	Claims in excess of 20		
1201	86	2201	43	Independent claims in excess of 3		
1203	290	2203	145	Multiple dependent claim, if not paid		
1204	86	2204	43	**Reissue independent claims over original patent		
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent		
SUBTOTAL (2) \$					<u>0</u>	

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FEE CALCULATION (continued)**3. ADDITIONAL FEES**

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<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1813	8,800	1813	8,800	Request for inter parties reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	330.00
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	For filing a submission after final rejection (see 37 CFR 1.129(a))	
1814	110	2814	55	Statutory Disclaimer	
1810	770	2810	385	For each additional invention to be examined (see 37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
1504	300	1504	300	Publication fee for early, voluntary, or normal pub.	
1505	300	1505	300	Publication fee for republication	
1803	130	1803	130	Request for voluntary publication or republication	
1808	130	1808	130	Processing fee under 37 CFR 1.17(i) (except provisionals)	
1454	1,330	1454	1,330	Acceptance of unintentionally delayed claim for priority	

Other fee (specify) _____

Other fee (specify) _____

SUBTOTAL (3) \$330.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:

Typed or Printed Name: Sheryl Sue Holloway

Signature: _____ Date: AUG 17, 2004

Reg. Number: 37,850 Telephone Number: 408-720-8300

Send to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450